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CONFIRMATION NO. 8330

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/712,486		606	3739	2876

APPLICANTS

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** CONTINUING DATA ****

This appln claims benefit of 60/426,155 11/14/2002

** FOREIGN APPLICATIONS ****

** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

02/10/2004

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance			
Verified and Acknowledged	/MICHAEL F PEFFLEY/ Examiner's Signature	Initials	CO	4	20
					2

ADDRESS

TYCO Healthcare Group LP
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TITLE

Compressible jaw configuration with bipolar RF output electrodes for soft tissue fusion

FILING FEE RECEIVED 2312	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit